UNIT CLEARANCE RECORD												
For use of this form, see AR 608-8-101; the proponent agency is ODCSPER												
			DATA	REQUIRED BY THE PR	IVACY A	CT OF 1974						
PRINCIPAL PURPOSE: ROUTINE USES:	To ensure To close	301, Title 5, USC. e personnel readiness prior to PCS. To complete clearance verification prior to transition from active duty, separation, or retirement. out installation personnel and finance records. To ensure debt to government or government sponsored agencies is identified and action taken to obtain										
		nce prior to soldier's transition from Active duty, separation or retirement. Forms will not be disclosed outside Department of Defense (DoD) and DoD sponsored agencies. ure is voluntary; however, failure to complete these forms may result in only partial payment of final pay.										
properly complete this ch verification by DFAS of a asterisk (*) require cleara	necklist. If iny outsta ince for pe	s out-processing packet is designed to ass you are separating or retiring from the Anding debts. Activities marked with an @ ersonnel departing on PCS. Activities not installation clearance is completed.	ctive Arm require c	y, failure to complete this learance for all personnel	checklist of separating	correctly and entirely will result or retiring from the Active Arm	t in you receiving ny, to include A	55 percent 3R personne	t of your final pay pending el. Activities marked with an			
soldier's final leave and p are required for all soldier hand-carried by the soldier	oay entitle rs transitio er or appo	PAC SUPERVISOR: This soldier is scheduments, we require your assistance. Compining, separating, or retiring from the Activited representative to the Military Pay St transition, separation or retirement, pend	olete items ve Army. ation and	below identifying actions Items marked with an ast the Out-Processing Contro	within the erisk (*) a ol Station	e last 60 days prior to the soldi are required for soldiers PCSing. for final processing. Failure to	ier's separation of This information provide this info	or retiremen on must be p rmation will	t date. Items marked with an @ provided, confirmed and			
		SECTION A - PERSONAL DATA (To	o be con	npleted by commander	, S1, out	-processing control station	, or appointed	official)				
1. NAME			2. RANK 3. SSN				4. ORDERS NO.					
5. GAINING UNIT				6. LOSING UNIT	1			7. DATE OF ORDERS				
8. REASON FOR CLEA	ARING ETS	RETIREMENT OTHER	(Specify	v)				9. DEPAR	RTURE DATE			
				SECTION B - DEBT VI	ERIFICAT	IONS						
DUTY STATUS	s@	10a. TYPE OF ABSENCE	Ob. LOG NU	JMBER OR ORDER NU WHEN APPLICABLE)	MBER	10c. START DATE	Ē	10d.	RETURN DATE			
HOSPITALIZATION, FIELD	D ,											
DUTY, LOST TIME, AWO CONFINEMENT WITHIN 6	60											
DAYS PRIOR TO ISSUAN CLEARANCE FORMS.	NCE UF											
	F											

SECTION B - DEBT VERIFICATIONS (cont.)												
11. ADVERSE ACTIONS@	OF ACTION	F ACTION 11b. DATE OF SOURC DOCUMENT			1c. PUNI		11d. EFFECTIVE DATE			11e. COMPLETION DATE		
All that have occurred within the 60 days prior to issuance of DA FORM 137-R series. INCLUDE:												
UCMJ, Court Martial, Admin. Reductions, and Administrative Discharges.												
12. PROPERTY ACCOUNTABILITY@				12b. DAT	ATE OF SOURCE DOCUMENT 12c.			12c. A	AMOUNT 12c			d. DISPOSITION
13.	HAT APPLY:											
SPECIAL PAYS@* SDAP FLPP JUMP DEIP SEA DEMOLITION FLIGHT OTHER												
14. BN S1/Unit Comma	ado# 4.4	- TVDE OD DDIN		CTION C -	UNIT / BA	TTALION CL		@*				14. DATE
VERIFYING OFFICIAL	a. TYPE OR PRIN	TYPE OR PRINT NAME			14b. SIGNATURE						14c. DATE	
EVALUATIONS	MEAL CARD	MEAL CARD			PROFILE							
DUTY ROSTER	MAIL ROOM	MAIL ROOM										
DA FORM 31	FLAGGED	FLAGGED										
15. BN S2/3/Unit Comm VERIFYING OFFICIAL	a. TYPE OR PRIN	TYPE OR PRINT NAME			15b. SIGNATURE						15c. DATE	
SECURITY DEBRIEFING	ANTI-TERRORI	ANTI-TERRORISM BRIEFING			TRAINING ROOM TRAIN					INING RECORD		
16. BN S4/Unit Comma VERIFYING OFFICIAL	a. TYPE OR PRIN	TYPE OR PRINT NAME			16b. SIGNATURE						16c. DATE	
MOTOR POOL	NBC ROOM	NBC ROOM										
SUPPLY ROOM	ARMS ROOM	ARMS ROOM										
17. OTHER					17a. TYPE OR PRINT NAME			17b.	SIGNATURE		17c. DATE	
CAREER COUNSELOR												
18. NAME OF SOLDIER					18a. SIGNATURE				18b. DATE			
19. NAME OF COMMANDER/S1 AUTHENTICATING OFFICIAL				19a. SIGNATURE						19b. DA	TE	